PTO/SB/06 (08-03)
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Z AMENDMENT PAID FOR FEE FEE	Unc	ler the Paperwor	k Reduction Act of	1995, no	oersons are requi	red to respond to	o a	collection of inf	ormation unles	ss it displa	ys a valid OMB o	ontrol number.
Column 1)		PAT	ENT APPLIC				N I	RECORD		89		548
FOR NUMBER FILED NUMBER EXTRA RATE FEE FEE GR S GR S GR GFR (1.6(a)) GFR (1.6(b)) minus 20 =								SMALL E	ENTITY	or		
Sacritic Fee							RATE	FEE		RATE	FEE	
TOTAL CLAIMS COLUMN 1 Sess than zero, enter '0' in column 2. TOTAL OR T	BASIC FEE									OR		
NULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) (37 CFR 1.16(d)) (Column 1) (Column 2) (Column 3) (Column 3) (Column 3) (Column 4) (Column 4) (Column 5) (Column 5) (Column 6) (Column 7) (Column	TOTA	AL CLAIMS		minus 20 =		•		x \$=		OR	x \$=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) *If the difference in column 1 is less than zero, enter *0* in column 2. *If the difference in column 1 is less than zero, enter *0* in column 2. *If the difference in column 1 is less than zero, enter *0* in column 2. *If the difference in column 1 is less than zero, enter *0* in column 2. *IT TOTAL **IT TOT	INDE	PENDENT CLAIM	ns					x \$ =		OR	x s=	
*If the difference in column 1 is less than zero, enter '0' in column 2. CAIMS AS AMENDED – PART II (Column 1) (Column 2) (Column 3) SMALL ENTITY REMAINING AFTER PREVIOUSLY PAID FOR EXTRA PAID FOR (GOR 1.16(d)) PRESENT FEE TOTAL ADDITIONAL FEE TOTAL ADDITION	(St. Carrier, Carrier							+ < =		OR	+s =	
Calms Column 1 Column 2 Column 3 SMALL ENTITY OR OTHER THAN SMALL ENTITY OR OR OR OR OR OR OR O										1		
Column 1)	If the difference in column 1 is 1835 than 2019, other or in column 2											
Column 1)												R THAN
REMAINING AFTER PREVIOUSLY PRESENT EXTRA RATE ADDITIONAL FEE	n	7503		r		(Column 3)		SMALL I	ENTITY	0K 1		
Column 1)	Z LN		REMAINING AFTER		NUMBER PREVIOUSLY			RATE	TIONAL		RATE	TIONAL
Column 1)	ME			Minus	"40			× 5===		OR	× \$=	
Column 1)	빏		· 8	Minus	 8	-		X \$=		OR	x \$=	
Column 1)	₩	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDE	NT CLAIM (37 CF	R 1.16(d))		+\$ =		OR	+ \$=	
CLAIMS REMAINING AFTER PREVIOUSLY EXTRA PREVIOUSLY FEE	I					J				OR		
CLAIMS REMAINING AFTER PREVIOUSLY EXTRA PREVIOUSLY FEE			(Column 1)		(Column 2)	(Column 3)						
TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT RATE ADDI- REMAINING NUMBER PRESENT RATE ADDI-			CLAIMS REMAINING AFTER		HIGHEST NUMBER PREVIOUSLY			RATE	TIONAL		RATE	TIONAL
TOTAL ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT RATE ADDI- REMAINING NUMBER PRESENT RATE ADDI-	ME		•	Minus	**	#		x \$=		OR	x \$=	
TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST NUMBER PRESENT RATE ADDI- REMAINING NUMBER PRESENT RATE ADDI-	EN	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x s=	
TOTAL	AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+s =		OR	+s =	
CLAIMS HIGHEST REMAINING NUMBER PRESENT RATE ADDI-							ı	TOTAL		OR	TOTAL	
O REMAINING NUMBER PRESENT RATE ADDI- RATE ADDI-						(Column 3)				7		<u> </u>
Total ' Minus '' =			REMAINING AFTER		NUMBER PREVIOUSLY			RATE	TIONAL		RATE	TIONAL
(37 CFR 1.16(c)) X \$= OR X \$=				Minus	**	r		x \$=		OR	x \$=	
Z Independent (37 CFR 1.16(b))	EN	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) + s = OR + s =	AM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))						+ \$=		OR	+ s=	
TOTAL TOTAL ADD'L FEE OR ADD'L FEE										OR		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".	l '	" If the "Highest	Number Previously	y Paid For	IN THIS SPACE	is less than 20,	en	iter "20".		_		

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.